

COALITION LETTER

The adoption of harm reduction practices for people who smoke can increase quit rates and decrease health risks for more Americans.

April 24, 2025



The Honorable Guy Reschenthaler
Co-Chair
Tobacco Harm Reduction Caucus
U.S. House of Representatives
Washington, D.C., 20515

The Honorable Don Davis
Co-Chair
Tobacco Harm Reduction Caucus
U.S. House of Representatives
Washington, D.C., 20515



SUBJECT: Congressional Tobacco Harm Reduction Caucus, 119th Congress



Dear Chairs Reschenthaler and Davis,

We write to congratulate you on the formation of the Congressional Tobacco Harm Reduction Caucus for the 119th Congress. We commend your bipartisan efforts to explore harm reduction in tobacco use and look forward to working with you on this important issue. We appreciated the Caucus' work in the last Congress, including [urging](#) the Food and Drug Administration to take swifter action to bring harm reduction products into the legal, regulated market and [making it clear](#) that American innovation in harm reduction can and should be part of tobacco control.



The undersigned are ideologically diverse public policy, public health, and community organizations united in our commitment to empowering people with [accurate information](#) and [evidence-based tools](#) to improve their health and even save their lives. In tobacco use, as elsewhere, we believe such lifesaving efforts must include risk reduction measures alongside prevention and treatment.



This is a pressing issue. Combustible cigarette smoking is still the leading cause of preventable death in the United States, contributing to [480,000 premature deaths](#) each year. Nearly [30 million](#) Americans smoke combustible cigarettes and [more than 16 million](#) are living with diseases caused by smoking. In addition to the loss of life, smoking costs our economy [more than \\$600 billion](#) per year.



On the prevention front, we are seeing strong progress. The number of young people who smoke is at a [record low](#). But there is more work to be done, which is why we are gratified to see youth prevention listed among your caucus priorities.

For millions of adults, smoking remains an intractable issue. The safest option is to quit outright. Each year, [more than half](#) of adults who smoke try to quit; however, fewer than 8

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percent actually do so. Cessation programs and medication are essential pieces of the puzzle, but we will all benefit if we can expand the universe of options for adults to reduce their health risks.

We have seen time and again that [prohibition does not work](#), and that its harms fall most heavily on already marginalized communities. We also know that nicotine, while addictive, [is not the cause](#) of smoking-related death and disease. The adoption of [harm reduction practices](#) for people who smoke can [increase quit rates](#) and decrease health risks for more Americans. This is especially important for populations whose smoking quit rates remain stubbornly low, such as [veterans](#), people with [substance use disorder](#), people [living with HIV](#), [rural communities](#), [communities of color](#), and [older Americans](#).

As organizations that care about people impacted by the harms of smoking, we applaud the inclusion of tobacco harm reduction in the conversation. We believe that a thoughtful, harm reduction-informed approach can ensure continued success in youth prevention while helping millions of Americans who would benefit from an [effective off-ramp](#) from smoking.

For additional information, please contact Alexandra Perez at aperez@rstreet.org.

Respectfully,

American Latino Veterans Association
Americans for Tax Reform
Black Police Experience
CAN-DO Foundation
Consumer Choice Center
Drug Policy Alliance
Due Process Institute
Hispanic Leadership Fund
Law Enforcement Action Partnership
National Association of Criminal Defense Lawyers
National Harm Reduction Coalition
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